## Town, City, Village, State or Federal Permits May Also Be Required

not completed or if any conditions are violated.

LAND USE - X SANITARY - 10-60S

SIGN -SPECIAL - NA

**CONDITIONAL -**

BOA -

## BAYFIELD COUNTY PERMIT

## WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

Issued To: WILLIAM S WIETHOFF Tax ID: 36870 No: 07052202-2022 Township 50 N. Location: PAR IN SW SW DESC IN V.1120 Section 14 Range 08 W. **PORT WING** P.665 338 **Subdivision:** Block CSM# 4601 **Govt Lot 1** Lot For: Residential / Detached Garage / 30L x 20W x 8H Condition(s): To meet all setbacks, including eaves and overhangs. No plumbing permitted. No bedrooms/living quarters permitted. For personal storage only. Town/State/DNR permits may be needed. This permit expires one year from date of issuance if the authorized **Erica Meulemans** construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the Wed Jul 27 2022 application information is found to have been misrepresented, erroneous, or incomplete. Date This permit may be void or revoked if any performance conditions are

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:



#### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

APR 21 2022

Bayfield Co.

Permit #:	22-6071
Date:	4-29-202
Amount Paid:	\$75 ACC Bldg 34
Other:	
Refund:	

Checks are made payable to: Bayfield County Zoning Department.	
DO NOT STAFF CONSTRUCTION	

				es are paid. Department.		Planning and Zoni			Refu			
DO NOT START CO	NSTRUCTIO	N <u>UNTIL</u>	ALL PERMITS I	HAVE BEEN ISS	SUED TO A	APPLICANT. Orig	ginal	Application <u>N</u>	<u>1UST</u> be submit	ed FIL	LOUT IN INK	NO PENCIL)
TYPE OF PERMIT R	EQUESTE	) +>	□ LAND	USE 🗆 S	ANITAR	44 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	CON	IDITIONAL USI		ISE 🗆 B	.o.a. 🗆 oth	ER
Owner's Name: DANIEL	HUN	STIS	NR.		Mailing	Address:		Ci	ty/State/Zip: PORT WING	111) <	4865 718	ephone: -774-340/
Address of Property	v:	-/1	2		City	/State/Zip:	1.		OK WITH	<i>LU)</i>	,,,,	•
Email: (print clear	(v) // /		0			PORT WIND	WI	.54865			1/C	Phone:
	"dhu	NST	19ERA	PREMI			OM	1			///3	-710-03 73
Contractor:		,	0	′	Contract	tor Phone:	PI	umber:			Plu	mber Phone:
Authorized Agent:	(Person Signi	ng Applica	ation on behalf	of	Agent Pl	hone:	A	gent Mailing Add	dress (include City)	State/Zip):	. 107	ritten Authorization
Owner(s))											Re	equired (for Agent)
PROJECT LOCATION	egal Descri		(Use Tax Stat	tement)	Tax	28218			7.34	Recorded	Document: (Show	ing Ownership)
5k 1/4, St	1/4/3		't Lot	Lot(s) C	SM V		Doc#		Block #	Subdivisio	on:	
Section Section	E, Townsh		and the second	ge_08	w	Town of: Pop	of 0	Wilz		Lot Size		Acreage 44,3
15		/1 -		00 f1 - f D:				0				
			ard side of F			am (incl. Intermittent) escontinue		Distance Struc	ture is from Shor	eline : feet	Is your Propert in Floodplain	Are Metlande
☐ Shoreland —	ls Pro	erty/La	nd within 1	000 feet of L	ake, Pon	nd or Flowage		Distance Struc	ture is from Shor	eline :	Zone?	☐ Yes
	M	Į.	1.46	. 100	If y	escontinue>	8	<del>diam'r.</del>		feet	No	No.
Non- Shoreland									5.7	75.5		
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Value at Time of Completion								Total # of		What Ty		Type of
* include		Projec	t	Proje # of Sto	Mark of Charles	Project Foundation		bedrooms on			y System(s) operty or	Water
donated time & material				" 01 500	dh an	roundation		property	The second secon		property?	on property
	☐ New	Constr	uction	1-Stor	у	☐ Basement		X1	☐ Municipal/			☐ City
07	☐ Addit	ion/Al	teration	☐ 1-Stor	y +	☐ Foundation		□ 2	☐ (New) Sani	tary Spe	cify Type:	Well
\$ 7000				Loft			_		Sanitary (E	victe) Cae	aif. Turne.	/ -
	☐ Conv	ersion	-	2-Stor	У	□ Slab	-1	□ 3	Mo	W/	ectivitype:	
			sting bldg)			XDITUI	aju				aulted (min 200 p	gallon)
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		ertv				Use 'C		☐ None	☐ Portable (v		ontract)	
		erty				☐ Year Round		□ None	☐ Compost T☐ None		ontract)	
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Existing Structu Proposed Cons	re: (if add	ition, alt	eration or bu		g applied	☐ Year Round	1	None	☐ Compost T		Height:	12.5 FT
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Proposed Cons	re: (if add	ition, alt	eration or bu	ns)		Year Round	ıcture	10	☐ Compost T☐ None	oilet	Height: Height:	Square Footage
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Proposed Cons  Proposed U  Residentia  Commerci  Municipal  I (we) declare that this (are) responsible for tresult of Bayfield Couproperty at any reason Owner(s):	Jse  I Use  I use  I use  I use	including a securacy of this informathe, purpo	Bunkhou Mobile H Addition, Accessor Special U Condition Other: (e)  FAILURE TO not all information nation I (we) am of inspection.	Structure se (i.e. cabir with Lof with a P with (2 <sup>n</sup> with Att se w/ (   sa lome (manu /Alteration y Building ( y Building A se: (explain) and Use: (ex public (ex public (ex)	(first str n, hunting ft Porch Deck Deck d) Deck tached ( nitary, o ffactured a (explain) Addition plain)	FARTING CONSTRUCTI mined by me (us) and to distait will be relied upon the following should be relied	on with the best sent to	THOUT A PERMIT of my (our) knowled county officials charged	Compost T None  Width: Width:  Width:  Width:  Will RESULT IN PEr dge and belief it is true, ermining whether to iss ged with administering	( ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	Height: Height:  X	Footage  Flootage  Veledge that I (we) am billity which may be a the above described

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach Copy of Tax Statement If you recently purchased the property send your Recorded Deed

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: (2)

**Proposed Construction** 

Fill Out in Ink - NO PENCIL

(3)

Show / Indicate: North (N) on Plot Plan Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)

(4)Show: All Existing Structures on your Property

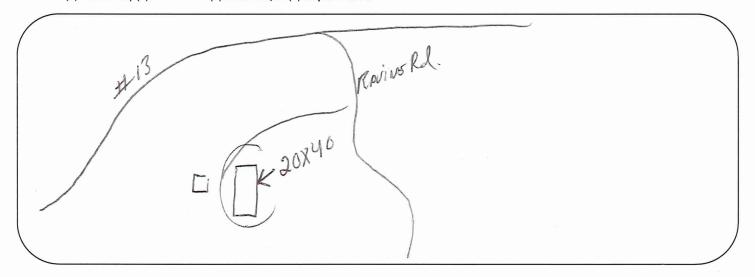
(5) Show: Show any (\*): (6)

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*): (7)

(\*) Wetlands; or (\*) Slopes over 20%



#### Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Description		Description	Setback Measurements	
Setback from the Centerline of Platted Road	642 591 Feet		Setback from the Lake (ordinary high-water mark)	Fęe	
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Fee	
	4 7		Setback from the Bank or Bluff	Fee	
Setback from the North Lot Line	56t 555Feet				
Setback from the <b>South</b> Lot Line	717 111 Feet		Setback from Wetland	Fee	
Setback from the West Lot Line	973 Jouveet		20% Slope Area on the property	☐ Yes ☐ No	
Setback from the <b>East</b> Lot Line	3H 124 Feet		Elevation of Floodplain	Fee	
Setback to Septic Tank or Holding Tank	152 \36 Feet		Setback to Well	Fee	
Setback to Drain Field	Feet	H			
Setback to Privy (Portable, Composting)	Feet	KA			

usly surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 47	12:11	# of bedrooms: 🧳	Sanitary Date: 9-14-04
		5 596	depth men 6	7-19-09
Permit Denied (Date):	Reason for Denial:			
Permit #: 22 - 007/	Permit Date: 29	2022		
Is Parcel a Sub-Standard Lot		Mitigation Required	☐ Yes →No	Affidavit Required  Yes No
Is Parcel in Common Ownership Is Structure Non-Conforming  Yes  (Fused/Contigu		Mitigation Attached	☐ Yes No	Affidavit Attached
Granted by Variance (B.O.A.)  ☐ Yes ✓ No Case #:		Previously Granted by  Yes No	y Variance (B.O.A.)	± #:
Was Parcel Legally Created Was Proposed Building Site Delineated		Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ No
Inspection Record: 40' × 18' Car Port	on gravel	pnd	House I was	Zoning District ( 🖺 ) Lakes Classification ( )
	Inspected by: 4M			Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attac	ched? Yes No - (If	No they need to be atta	iched.)	FAR DACMIN
To meet all set bucks, ear	ves and over	nangs. No	s sleeping/ in	Any quarters forming
Condition(s): Town, Committee or Board Conditions Attactor melt all 3et backs, ear personal stor	age only. Too	un/State/DN	12 permits	may be required.
No plumbing permitted				and the second s
Signature of Inspector: Gucallin land	any			Date of Approval: 427-22
Hold For Sanitary:   Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:	

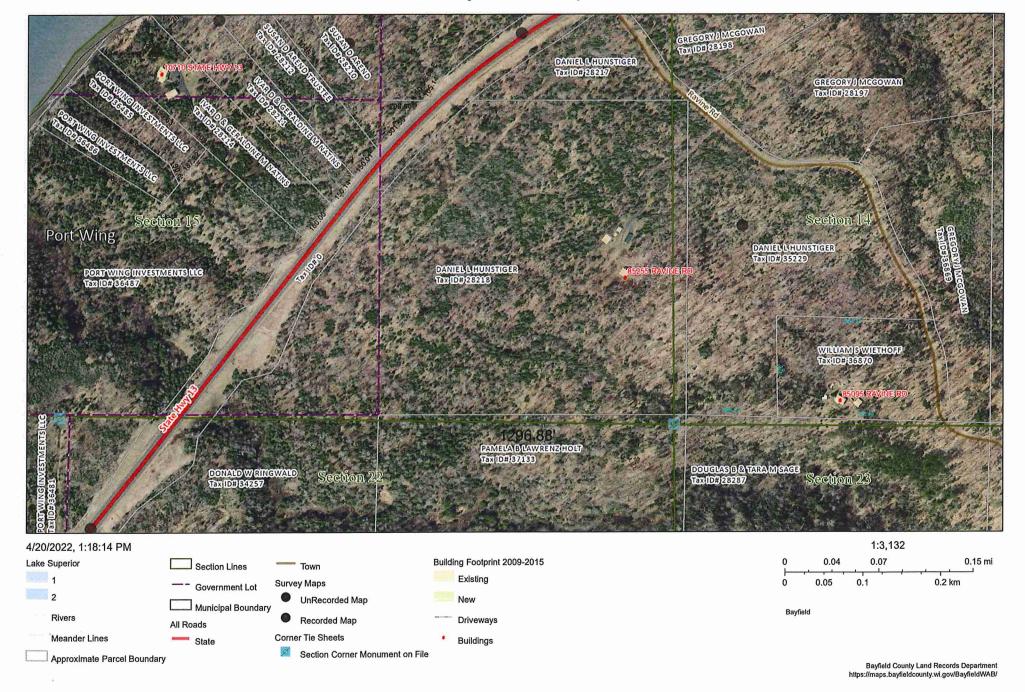
(®August 2021) ®®January 2000

•	estigation
Date: 4-21-77	Arrive: 13:37 Depart: 13:50
Landowner: Hunstiger, Daniel	Photos faken: (es No
Project Location: 85755 Pavine Rd	Persons Present GM
Waterway:  PIN#*Attach Real Estate Inquiry*  Paid \$ Receipt #	Purpose of visif:  X ZP Onsite SAP Sanitary Wetland Delineation Hoodplain OHWM Boathouse Complaint Averaging Walkout Other:
Cavine Rd	40 ×20 ×12.5 F1 Carport 44.350er
ayine leas	Per mitted
	Mous

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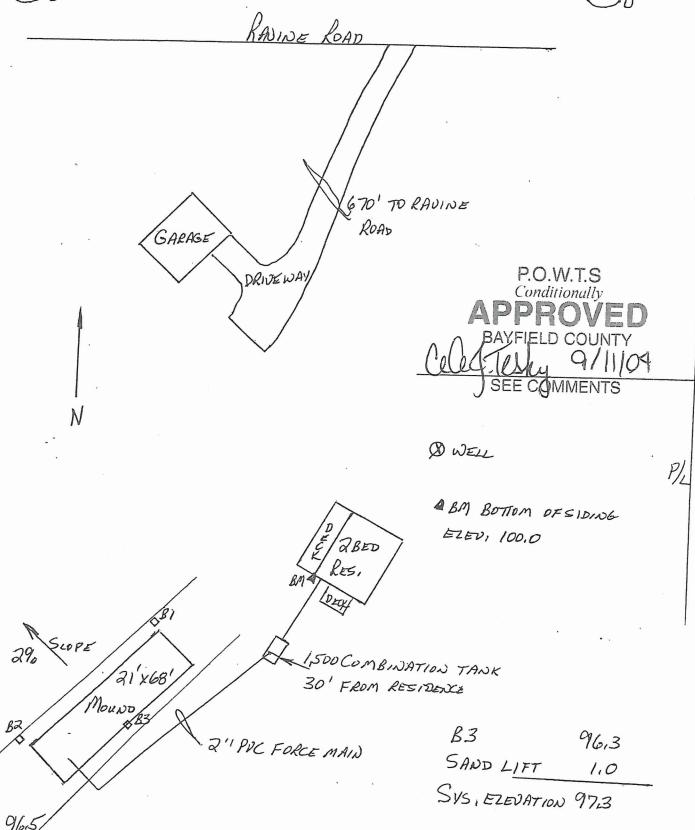
#### Bayfield County, WI





P. O. BOX 56 WASHBURN, WISCONSIN 54891 (715)373-2070





RECEIVED SEP 9 200						
	County BAYFIELD					
Wissonsin	201 W. Washington Ave., P.O. Box 7162 Madison, WI 53707 – 7162 (608) 266-3151					
Department of Commerce	425346					
Sanitary Pern	State Plan I.D. Number					
In accord with Comm 83.21, Wis. Adm	1056093					
may be used for secondary pur	Project Address (if different than mailing address)					
I. Application Information - Please Print All	Information					
Property Owner's Name	DECEIVE D	Parcel # Lot # Block #				
DAN HUNSTIGER	U/ 012 1 7 0004	042-1044-04-990 Property Location 6217-107-3				
Property Owner's Mailing Address	M SEP 1 3 2004	000120101				
Property Owner's Mailing Address  85255 RAVINE RE City, State	Zip Code BayPhone Numberling Dept.	SE 14, SE 14, Section 15				
PORT WING, WI	54844 715-774-3401	T_SO N; R_S (circle one)				
II. Type of Building (check all that apply)	_	Subdivision Name CSM Number				
1 or 2 Family Dwelling – Number of Bedrooms  Public/Commercial – Describe Use						
State Owned – Describe Use		City_Uvillage Township of Port Wins				
III. Type of Permit: (Check only one box on	ine A. Complete line B if applicable)					
A. New System Replacement System	Treatment/Holding Tank Replacement Only	Other Modification to Existing System				
B. Permit Renewal Permit Revision Before Expiration	Change of Permit Transfer to New Owner	List Previous Permit Number and Date Issued				
IV. Type of POWTS System: (Check all that						
Non –Pressurized In-Ground Mound ≥ 24 in.	of Salabole Soli	At-Grade Single Pass Sand Filter				
Constructed Wetland Pressurized In-Ground						
Recirculating Synthetic Media Filter Leaching C  V. Dispersal/Treatment Area Information:	hamber Drip Line Gravel-less Pipe Other	r (explain)				
Design Flow (gpd) Design Soil Application Rate	gpdsf) Dispersal Area Required (sf) Dispersal Area	a Proposed (sf) System Elevation				
300 1.0	300 30					
VI. Tank Info  Capacity in Gallons  Gallon  New Existing	Managerarer	Prefab Site Steel Fiber Plastic Concrete Constructed Glass				
Tanks Tanks	1 121-62	<del>x                                     </del>				
Septic or Holding Tank 1,000 1,000	i WIESEL					
Dosing Chamber 500 500	1 COMBINATION	X				
	ed, assume responsibility for installation of the POWTS	shown on the attached plans.				
Plumber's Name (Print) Plumber's	Signature / MP/MPRS Number	Business Phone Number				
DENNISLIBACHAND Nem	is L. Backand 221446	715-373-2070				
Plumber's Address (Street, City, State, Zip Code)	177 -120:					
	RN, WI 54891					
VIII. County/Department Use Only	Sanitary Permit Fee (includes Groundwater Da	ate Issued Issuing Agent Signature (No Stamps)				
Approved Disapproved Owner Given Reason for Denial	Surcharge Fee) 5- 9/13/04 day	9/14/04 Celebraky				
IX. Conditions of Approval/Reasons for Disap						
Subject to conditions	A 1					
•						

#### Real Estate Bayfield County Property Listing

Today's Date: 4/20/2022

**Property Status: Current** 

Created On: 3/15/2006 1:15:58 PM

<b>Description</b>	Updated: 8/5/201
Tax ID:	28218
PIN:	04-042-2-50-08-15-4 04-000-10000
Legacy PIN:	042104404990
Map ID:	
Municipality:	(042) TOWN OF PORT WING
STR:	S15 T50N R08W
Description:	THAT PART OF GOVT LOT 3 & THE SE SE
·	LYING S OF HWY 13
Recorded Acres:	44.354
Calculated Acres:	44.354
Lottery Claims:	1
First Dollar:	Yes
Zoning:	(F-1) Forestry-1

127

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 3/15/2006

23	CONVERSION
4.0	COMATICATOM

ESN:

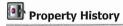
626-346 Date Recorded:

Ownership Updated: 2/17/2010 DANIEL L HUNSTIGER PORT WING WI **GLORIA E PASION** PORT WING WI

**Billing Address:** Mailing Address: HUNSTIGER, DANIEL L & PASION, GLORIA E PO BOX 21 PORT WING WI 54865 DANIEL L HUNSTIGER PO BOX 21 PORT WING WI 54865

Site Address * indicates Priva	ate Road
85255 RAVINE RD	PORT WING 54865
Property Assessment	Updated: 9/7/2021
2022 Assessment Detail	

2022 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	8,000	139,100
G6-PRODUCTIVE FOREST	43.354	47,700	0
2-Year Comparison	2021	2022	Change
Land:	55,700	55,700	0.0%
Improved:	139,100	139,100	0.0%
Total:	194,800	194,800	0.0%



N/A

### Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X (After-the-Fact)
SANITARY SIGN SPECIAL CONDITIONAL BOA -

completed or if any prohibitory conditions are violated.

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	lo. 22-0071 Issued To: Daniel Hunstiger and Gloria Pasion														
Location: <b>Lying S o</b> f			of	SE	1/4	Section	15	Township	50	N.	Range	8	W.	Town of	Port Wing
And That Gov't Lot	Part o	of	L	_ot		Blo	ck	Sul	bdivisio	on				CSM#	
(After-the- For:	(After-the-Fact) Residential Accessory:														

Condition(s): Meet all setbacks, including eaves and overhangs. No sleeping/living quarters permitted. No plumbing permitted. For personal storage only. Town/State/DNR permits may be required.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction work or land use has not begun.	Erica Meulemans, AZA
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found	Authorized Issuing Official
	to have been misrepresented, erroneous, or incomplete.	April 29, 2022
	This permit may be void or revoked if any performance conditions are not	Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138



#### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

APR 21 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0070
Date:	4-29-2022
Amount Paid:	\$ 15 ATF 4-26-22 175 Acc Blog. 216
Other:	
Refund:	

FILL OUT IN INK (NO PENCIL)

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION <u>UNTIL ALL PERMITS HAVE BEEN ISSUED</u> TO APPLICANT. Original Application MUST be submitted

Oursel's Name	EQUESTED	+	□ LAND	USE [	SANITA		□ C	ONDITIO				□В	.O.A. 🗆	OTHE	
Owner's Name:	HONST	Tion	الد		Mailing	g Address:			(	City/State/Zip:	. ,		-,,,,	Telep	phone: 774-3401
Address of Property		19901	0		(30)	X dl			1	rory w	11154	<u>11 S</u>	4565	112-	119-370
8725	V/	-URI	0		Like The	State/Zip:	w. W.	1 <	1865		0				Phone:
Email: (print clearly		/10	,	0 0		001 0011	-1		1060					715-	410-0593
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Contractor:			0	,	Contra	ctor Phone:		Plumber:						Plum	ber Phone:
														3 3370374	
Authorized Agent: (	Person Signin	g Applica	ation on behalf o	of	Agent I	Phone:		Agent Ma	ailing A	ddress (include	e City/Sta	te/Zip):		\A/rit	ten Authorization
Owner(s))							in pr								uired (for Agent)
PROJECT .					Tax	x ID#					Re	corded	Document: (	Showin	g Ownership)
LOCATION	gal Descrip	otion:	(Use Tax State	ement)		2821	Q				_		•		
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	Creek or	Landwa	ard side of Fl	loodplain?	lf ·	yescontinue	<b>→</b>					feet	in Flood		Are Wetlands
☐ Shoreland —	Is Prope	ertv/La	nd within 10	000 feet of	Lake Po	ond or Flowage		Dicton	an Chui	atura is from	Ch a!		Zone	?	Present?  Ves
	_ 10 1 1 Op.	c. c,, Lu		000 1000 01	If v	yescontinue	-	Distan	ce Stru	cture is from	Snorell	ne : feet	☐ Ye		>ZNo
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Shoreland															
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Proposed Const.  Proposed U  Residential  Commercia  I (we) declare that this (are) responsible for the result of Bayfield Cour property at any reasons Owner(s):  (If there are Multi-Authorized Agent)	re: (if additing a continuation:  I Use  application (incedetail and according application to the continuation of the continuation) and the continuation of the contin	cluding arcuracy of his inform the purpose	Bunkhous Mobile Ho Addition/ Accessory Special Us Conditions Other: (expected by accompanying all information I was all information	Structure e (i.e. cabi with Lo with a with (2 with a with (2 with At se w/ ( so ome (man 'Alteration' 'Building se: (explair al Use: (explair plain)  OBTAIN A PE information) ((we) am (are) (are) providing	(first st in, hunti oft Porch ond) Porce Deck tached anitary, ufacture n (explain (explain) Additio n) xplain)  cream or with must sign	Proposed tructure on pring shack, etc.  Ch  Garage or   sleeping of date)  in)  On/Alteration  STARTING CONSTR  camined by me (us) and that it will be reliated this application. I (we can be reliated by me (us) and the construction of a construct	Structure operty) ) quarters, (explain and to the bed upon by e) consent withorizati	MITHOUT A est of my (on must a	PERMI' ur) knowle inty in de icials cha	Width: 2 Width:  Width:  From the second prep factor of the second pre	cilities)  N PENALT  s true, corr  r to issue a tering cour	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Heigonimensions  X X X X X X X X X X X X X X X X X X	) ) ) ) ) ) ) ) ) ) ) ) ) ) ) cknowled	Square Footage
Proposed Const.  Proposed U  Residential  Commercia  I (we) declare that this (are) responsible for the result of Bayfield Cour property at any reasons Owner(s):  (If there are Multi-Authorized Agent)	re: (if additing a continuation:  I Use  application (incedetail and according application to the continuation of the continuation) and the continuation of the contin	cluding arcuracy of his inform the purpose	Bunkhous Mobile Ho Addition/ Accessory Special Us Conditions Other: (expected by accompanying all information I was all information	Structure e (i.e. cabi with Lo with a with (2 with a with (2 with At se w/ ( so ome (man 'Alteration' 'Building se: (explair al Use: (explair plain)  OBTAIN A PE information) ((we) am (are) (are) providing	(first st in, hunti oft Porch ond) Porce Deck tached anitary, ufacture n (explain (explain) Additio n) xplain)  cream or with must sign	Proposed tructure on pring shack, etc.  Ch  Garage or   sleeping of date)  in)  On/Alteration  STARTING CONSTR  camined by me (us) and that it will be reliated this application. I (won or letter(s) of automatical statement of the construction of	Structure operty) ) quarters, (explain and to the bed upon by e) consent withorizati	MITHOUT A est of my (on must a	PERMI' ur) knowle inty in de icials cha	Width: 2 Width:  Width:  From the second prep factor of the second pre	cilities)  N PENALT  s true, corr  r to issue a tering cour	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Heigonimensions  X X X X X X X X X X X X X X X X X X	) ) ) ) ) ) ) ) ) ) ) ) ) ) ) cknowled	Square Footage
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Proposed Const.  Proposed U  Residential  Commercia  Municipal U  I (we) declare that this a (are) responsible for the result of Bayfield County property at any reason (If there are Multi-Authorized Agent (If you a	re: (if additinuction:  Ise  I Use  application (incention of the continuation of the	cluding arcuracy of his inform fe purpos	Bunkhous Mobile Ho Addition/ Accessory Special Us Conditions Other: (expected by accompanying all information I (we) am (be of inspection.) The behalf of the	Structure e (i.e. cabi with Lo with a with (2 with a with (2 with At se w/ ( so ome (man 'Alteration' Building 'Building 'Buil	(first st in, hunti oft Porch and) Porce Deck anitary, ufacture n (explain (explain) xplain) xplain) standard must sign must sign	Proposed tructure on pring shack, etc.  Ch  K Garage or   sleeping of date) in) )	Structure operty) ) quarters, (explain of to the bad upon by e) content of the bad upon by thorizati	MITHOUT A sest of my (or Bayfield Count of country off country of country off country of count	PERMI'  Ir) knowle inty in de ricials cha	Width: 2 Width:  Food prep factors and prepared with administration of the second prepared with a second prep	cilities)  N PENAL s true, corr r to issue a tering cour	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Heigonimensions  X X X X X X X X X X X X X X X X X X	ht:  ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	Square Footage  400  dge that I (we) am ity which may be a e above described
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Proposed Const.  Proposed U  Residential  Commercia  I (we) declare that this (are) responsible for the result of Bayfield Cour property at any reasons Owner(s):  (If there are Multi-Authorized Agent)	re: (if additinuction:  Ise  I Use  application (incention application (incention application (incention application (incention application application (incention application (incention application a	cluding arcuracy of his inform fe purpos	Bunkhous Mobile Ho Addition/ Accessory Special Us Conditions Other: (expected by accompanying all information I (we) am (be of inspection.) The behalf of the	Structure e (i.e. cabi with Lo with a with (2 with a with (2 with At se w/ ( so ome (man 'Alteration' Building 'Building 'Buil	(first st in, hunti oft Porch and) Porce Deck anitary, ufacture n (explain (explain) xplain) xplain) standard must sign must sign	Proposed tructure on pring shack, etc.  Ch  K Garage or   sleeping of date) in) )	Structure operty) ) quarters, (explain of to the bad upon by e) content of the bad upon by thorizati	MITHOUT A sest of my (or Bayfield Count of country off country of country off country of count	PERMI'  Ir) knowle  inty in de- ficials cha	Width: 2 Width:  Food prep factors and prepared with administration of the second prepared with a second prep	cilities)  N PENAL s true, corr r to issue a tering cour	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Immensions  X  X  X  X  X  X  X  X  X  X  X  X  X	ht:  ) ) ) ) ) ) ) ) ) ) ) ) cknowled as to the sept liabilities to the sept liabilities to the sept liabilities.	Square Footage  400  dge that I (we) am ity which may be a e above described

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)Show / Indicate: (2)

**Proposed Construction** 

North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)Show:

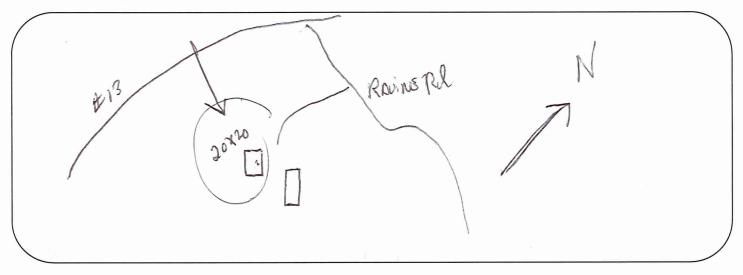
Show Location of (\*): (\*) **Driveway** and (\*) **Frontage Road** (Name Frontage Road) (3)

(5) Show: (6)Show any (\*): All Existing Structures on your Property (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*): (7)

(\*) Wetlands; or (\*) Slopes over 20%



#### Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

Description	Setba Measurer			Description	Setback Measurements	
Setback from the Centerline of Platted Road	595	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the <b>North</b> Lot Line	530	Feet				
Setback from the <b>South</b> Lot Line	761	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	1044	Feet	T:	20% Slope Area on the property	☐ Yes ☐	No
Setback from the East Lot Line	271	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	198	Feet		Setback to Well		Feet
Setback to Drain Field		Feet	17			
Setback to Privy (Portable, Composting)		Feet				

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 47	25246	# of bedrooms: 2	Sanitary Date: 9-14-04			
Permit Denied (Date):	Reason for Denial:	3.	A TANK TO A TANK				
Permit #: 22 - 6070	Permit Date: 39-	2022	Harries Plan				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  ☐ Yes (Deed of Re ☐ Yes (Fused/Conforming) ☐ Yes		Mitigation Required Mitigation Attached	☐ Yes ເNo No No	Affidavit Required Affidavit Attached □ Yes ❤ No ☐ Yes			
Granted by Variance (B.O.A.)  ☐ Yes Land Case #:		Previously Granted by ☐ Yes No	y Variance (B.O.A.) Case	·#:			
Was Parcel Legally Created Was Proposed Building Site Delineated ☐ Yes ☐	No	Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ Yes ☐ No			
Inspection Record: ZX × 18' Car POrt	on a gravel	Pad		Zoning District ( 🙌 ) Lakes Classification ( )			
Date of Inspection: 4-21-22	Inspected by:			Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions A	ttached? Yes 🗆 No – (If	No they need to be atta	iched.)	15 - 0 10 -			
To meet all setbacks, including eines and overhangs. No sleeping/living quarters permitted. No plumbing permitted. For personal storage only. Town/State/DNR permits may be required							
Signature of Inspector: Tuca Malan	ans			Date of Approval: 4-27-72			
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗌	Hold For Fees:	_ □			

### Field Investigation

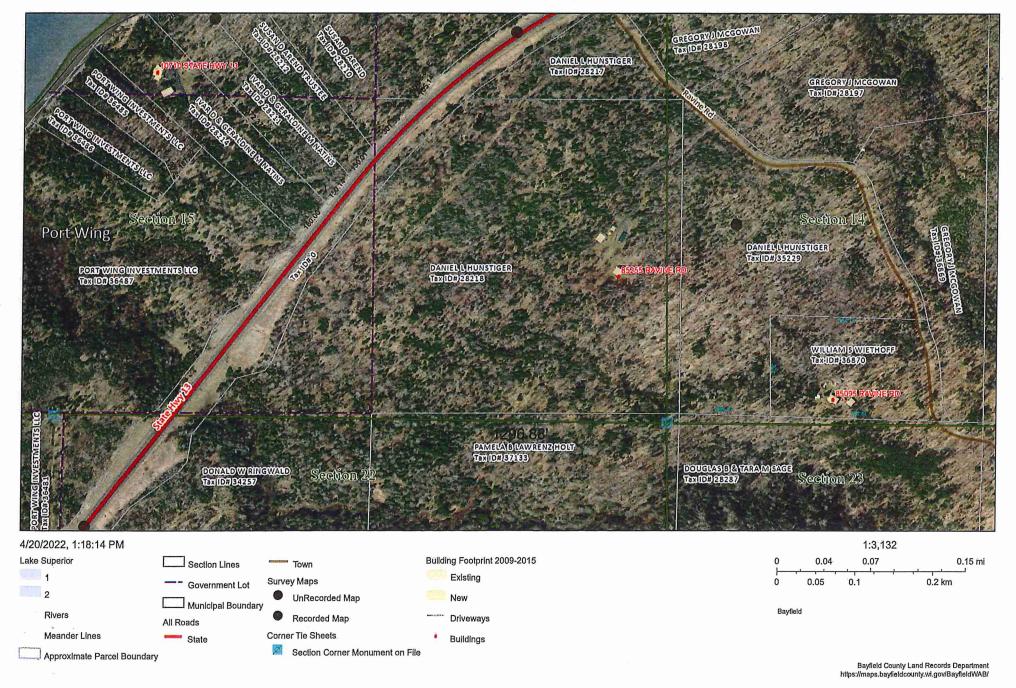
rieid III.	vesuganon .
Date: 4-27-27	Arrive: 13:37 Depart: 13:50
Landowner: Honsigon, Daniel	Photos taken: No .
Project Location: 85755 Raving Rd	Persons Present 4m
Waterway: PIN#*Attach Real Estate Inquiry*	Purpose of visif:
Paid \$Receipt#	AveragingWalkout
ravine ed	70×20×9.5 F1 Car port 70×18 44.35 acre
	Permitted
18 W	18   Your gravel pace
	Mous

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#### Bayfield County, WI

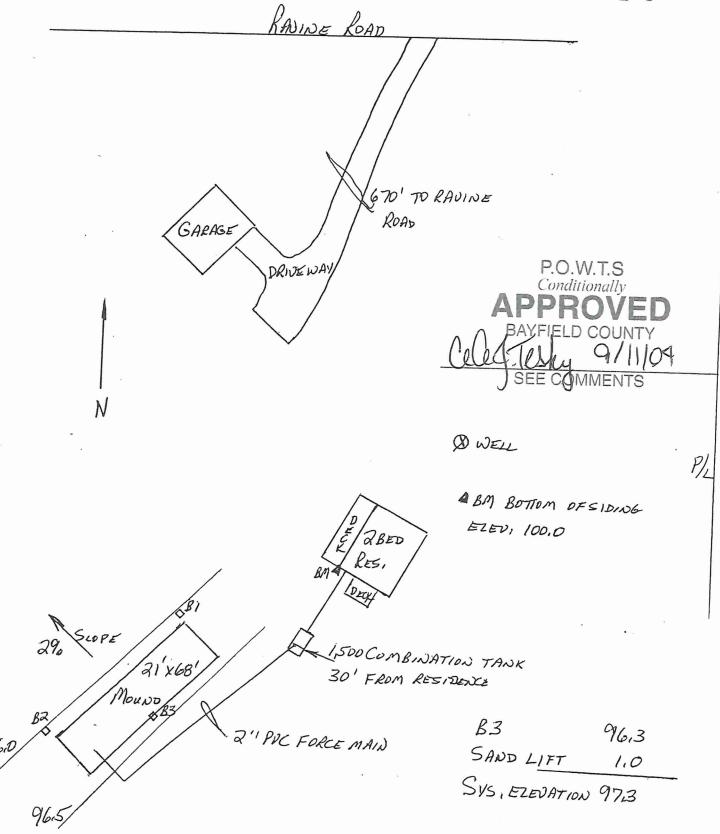


		RECEIVED SEP @ 9 200
Wisconsin Department of Commerce	Safety and Buildings Division 201 W. Washington Ave., P.O. Box 7162 Madison, WI 53707 - 7162 (608) 266-3151	Sanitary Permit Number (to be filled in by Co.) 425346
Sanitary Pern	it Application	State Plan I.D. Number
In accord with Comm 83.21, Wis. Adm.	Code, personal information you provide	Project Address (if different than mailing address)
may be used for secondary pur	osses Privacy Law, s15.04(1)(m) 501 TEST	Project Address (ii different than mailing address)
I. Application Information - Please Print All	nformation	
Property Owner's Name	h ECEIVE N	Parcel # Lot # Block #
DAN HUNSTIGER	0) 010 1 3 0001	042-1044-04-990 Property Location Court 107-3
Property Owner's Mailing Address  85255 RAVINE RD  City, State	SEP 1 3 2004	000120101
85 253 RADINE RD	Zip Code Bayfrione Numberling Dept.	<u>SE ¼, SE ¼,</u> Section <u>15</u>
PORT WING, WI	54844 715-774-3401	T SO N; R S (circle one)
II. Type of Building (check all that apply)	2	Subdivision Name CSM Number
1 or 2 Family Dwelling – Number of Bedrooms  Public/Commercial – Describe Use		
State Owned – Describe Use	1	City_Uvillage Township of Part Wings
III. Type of Permit: (Check only one box on li		
A. New System Replacement System	☐ Treatment/Holding Tank Replacement Only	☐ Other Modification to Existing System
A replacement system		List Previous Permit Number and Date Issued
B. Permit Renewal Permit Revision	☐ Change of ☐ Permit Transfer to New Owner	List Flevious Fernit (Valided and Date 1884ed
IV. Type of POWTS System: (Check all that:		
Non –Pressurized In-Ground Mound ≥ 24 in.		
Constructed Wetland Pressurized In-Ground		t Unit ☐ Recirculating Sand Filter ☐  or (explain)
Recirculating Synthetic Media Filter Leaching C  V. Dispersal/Treatment Area Information:		
Design Flow (gpd) Design Soil Application Rate(	,,	a Proposed (sf) System Elevation
300 1.0	300 30	Prefab   Site   Steel   Fiber   Plastic
VI. Tank Info Capacity in Total Gallons Gallons	Number Manufacturer of Units	Concrete Constructed Glass
New Existing Tanks Tanks		
Septic or Holding Tank 1,000 1,000	1 WIESEL	X
Aerobic Treatment Unit		
Dosing Chamber 500 500	1 COMBINATION	X
VII. Responsibility Statement- I, the undersign	d, assume responsibility for installation of the POWTS	S shown on the attached plans.  Business Phone Number
Plumber's Name (Print) Plumber's S	Ignature 271446	715-373-2070
Plumber's Address (Street, City, State, Zip Code)	1 Dachand 021476	113 313 2010
O 0	en, WI 54891	
VIII. County/Department Use Only		
Approved Disapproved	Sumary Formit Foo (morages organization)	ate Issued Issuing Agent Signature (No Stamps)
9/11/04 Downer Given Reason for Denial	275 9113104 Oak	9/14/04 Celebresky
IX. Conditions of Approval/Reasons for Disap		J
Subject to conditions	an state applocal	



P. O. BOX 56 WASHBURN, WISCONSIN 54891 (715)373-2070





#### Real Estate Bayfield County Property Listing

Today's Date: 4/20/2022

Date Recorded:

**Property Status: Current** 

Created On: 3/15/2006 1:15:58 PM

<b>Description</b>	Updated: 8/5/2015
Tax ID:	28218
PIN:	04-042-2-50-08-15-4 04-000-10000
Legacy PIN:	042104404990
Map ID:	
Municipality:	(042) TOWN OF PORT WING
STR:	S15 T50N R08W
Description:	THAT PART OF GOVT LOT 3 & THE SE SE LYING S OF HWY 13
Recorded Acres:	44.354
Calculated Acres:	44.354
Lottery Claims:	1
First Dollar:	Yes
Zoning:	(F-1) Forestry-1
FSN:	127

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 3/15/2006
CONVERSION	

TECHNICAL COLLEGE	
Updated: 3/15/2006	
626-346	

Ownership Updated: 2/17/2010 PORT WING WI **DANIEL L HUNSTIGER** PORT WING WI **GLORIA E PASION** 

Mailing Address: **Billing Address: DANIEL L HUNSTIGER, DANIEL L & PASION,** HUNSTIGER **GLORIA E** PO BOX 21 PO BOX 21 PORT WING WI 54865 PORT WING WI 54865

Fite Address \* indicates Private Road

85255 RAVINE RD	<u> </u>	PORT W	/ING 54865
Property Assessment		Updated	d: 9/7/2021
2022 Assessment Detail		<del></del>	
Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	8,000	139,100
G6-PRODUCTIVE FOREST	43.354	47,700	0
2-Year Comparison	2021	2022	Change
Land:	55,700	55,700	0.0%
Improved:	139,100	139,100	0.0%
Total	194.800	194,800	0.0%



N/A

### Town, City, Village, State or Federal Permits May Also Be Required

LAND USE – X (After-the-Fact)
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

completed or if any prohibitory conditions are violated.

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0	070		J	ssue	d To: <b>Da</b>	niel F	lunstiger a	nd Gl	oria l	Pasion				
Location: <b>Lying S o</b>			of	SE	1/4	Section	15	Township	50	N.	Range	8	W.	Town of	Port Wing
And That Gov't Lot	Part o	of	L	.ot		Blo	ck	Su	bdivisio	on				CSM#	
(After-the-Fact) Residential Accessory:  For:  [1- Story]; Car Port (20' x 20') = 400 sq. ft.; at a Height of 12.5'  (Disclaimer): Any future expansions or development would require additional permitting.															

Condition(s): Meet all setbacks, including eaves and overhangs. No sleeping/living quarters permitted. No plumbing permitted. For personal storage only. Town/State/DNR permits may be required.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Erica Meulemans, AZA		
	work or land use has not begun.  Changes in plans or specifications shall not be made without obtaining approval.  This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.	Authorized Issuing Official  April 29, 2022		
	This permit may be void or revoked if any performance conditions are not	Date		

### Town, City, Village, State or Federal Permits May Also Be Required

not completed or if any conditions are violated.

LAND USE - X
SANITARY - City
SIGN SPECIAL - NA
CONDITIONAL BOA -

## BAYFIELD COUNTY PERMIT

## WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

Issued To: Gerhard GERHARD W HETTLER III No: 03242201-2022 Tax ID: 38707 & CAROL A WESTON REV TRUST Section 32 Township 50 N. Range 08 W. Location: PAR IN NE NE IN DOC 2021R-592153 **Subdivision:** Block CSM# Govt Lot 0 Lot For. Residential / Attached Garage / 28L x 30W x 8H Condition(s): To meet all setbacks including eaves and overhangs. No sleeping and/or living quarters permitted. No plumbing permitted. For personal storage only. Town/State/DNR permits may be required. Height is being permitted at 15' instead of 8' as indicated at the time of submittal. This permit expires one year from date of issuance if the authorized NOTE: Mckenzie Slack construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the Thu Apr 28 2022 application information is found to have been misrepresented, erroneous, or incomplete. Date This permit may be void or revoked if any performance conditions are

(Displained). Any future amonaisme as development requires additional negatition

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03842201		i c
	Current Parcel Information	Applicant Parcel Information
Tax ID #	38707	38707
Taxpayer Name	GERHARD W HETTLER III & CAROL A WESTON REV TRUST	Gerhard GERHARD W HETTLER III & CAROL A WESTON RE\ TRUST
Site Address	82825 WHITE BIRCH RD	82825 WHITE BIRCH RD
Site City State Zip	PORT WING, WI 54865	PORT WING, WI, WI
Section/Township/Range	32/50/08	32/50/8
Abbreviated Legal	PAR IN NE NE IN DOC	PAR IN NE NE IN DOC 2021R-592153
Deeded Acres	0	0
Taxpayer Address	3852 EDGEWOOD AVE NORTH ⚠	3852 Edgewood Ave N
Taxpayer City, State Zip	CRYSTAL, MN 55427 🛆	Crystal, MN 55427

View Contacts

View Tax Record

Comments

Issuance Info

Timeline

**Property Details** 

Contact Info

**Project Review** 

Setbacks

North Lot Line	283.09 ft		Confirmed	Yes
South Lot Line	136.35 ft		Confirmed	Yes
East Lot Line	158.85 ft		Confirmed	Yes
West Lot Line	136.24 ft		Confirmed	Yes
Centerline of Platted Road	142.86 ft		Confirmed	Yes
River Stream Creek or Lake	300 ft		Confirmed	Yes
Wetland	25 ft +		Confirmed	Yes
Sanitary	0 ft		Confirmed	Yes
Well	0 ft	50 ft	Corrected	Yes
Established Right-of-Way	0 ft		Confirmed	Yes

Edit

## 28 x 30'



	*	

I, GERHARD WILLIAM HETTLER	
authorize CAROL A. WESTON	
to apply for a land use permit on our property located at:  82825 WHITE BIRCY POAD	PORT WING
Serand W Heth Signature	
4/21/2022 Date	

· 1 . 1 . 1 . 1
I, Carof Ann Weston 1111
authorize Berhard William Hettler

to apply for a land use permit on our property located at:

Cowldan Wester Signature

4/21/22 Date

#### Bayfield County, WI





ESN:

Date Recorded:

#### Real Estate Bayfield County Property Listing

Today's Date: 4/26/2022

**Property Status: Current** 

Created On: 2/3/2022 10:39:14 AM

Description	Updated: 2/3/2022
Tax ID:	38707
PIN:	04-042-2-50-08-32-1 01-000-11100
Legacy PIN:	
Map ID:	
Municipality:	(042) TOWN OF PORT WING
STR:	S32 T50N R08W
Description:	PAR IN NE NE IN DOC 2021R-592153
Recorded Acres:	0.000
Calculated Acres:	3.450
Lottery Claims:	0
First Dollar:	No
Zoning:	(R-4) Residential-4

127

Tax Districts	Updated: 2/3/2022
1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
047100	PORT WING SANITARY
Recorded Documents	Updated: 3/15/2006

<b>⊞</b> WARRANTY DEED	
Date Recorded: 11/19/2021	2021R-592153
<b>☐</b> TERMINATION OF DECEDENT'S INTER	EST
Date Recorded: 4/13/2020	2020R-581717

**QUIT CLAIM DEED** Date Recorded: 2/9/2007 2007R-512187 964-136 **CONVERSION** 

WARRANTY DEED Date Recorded: 9/23/1988 376715 477-52

🔐 Ownership

Updated: 2/3/2022 CRYSTAL MN

**GERHARD W HETTLER III & CAROL A WESTON REV TRUST** 

**Billing Address: Mailing Address:** GERHARD W HETTLER III & **GERHARD W HETTLER III &** CAROL A WESTON REV TRUST CAROL A WESTON REV TRUST 3852 EDGEWOOD AVE NORTH 3852 EDGEWOOD AVE NORTH

CRYSTAL MN 55427

CRYSTAL MN 55427

Site Address \* indicates Private Road 82825 WHITE BIRCH RD

PORT WING 54865

Property Assessment Updat			dated: N/A			
2022 Assessment Detail						
Code	Acres	Land	Imp.			
N/A						
2-Year Comparison	2021	2022	Change			
Land:	0	0	0.0%			
Improved:	0	0	0.0%			
Total:	0	0	0.0%			

Property History			
Parent Properties	Tax ID		
04-042-2-50-08-32-1 01-000-11000	28540		
04-042-2-50-08-32-1 01-000-19000	38212		

HISTORY E Expand All History White=Current Parcels Pink=Retired Parcels

**Tax ID:** 28544 Pin: 04-042-2-50-08-32-1 01-000-13000 Leg. Pin: 042107605000

**Tax ID:** 38212 **Pin:** 04-042-2-50-08-32-1 01-000-19000

Tax ID: 28540 Pin: 04-042-2-50-08-32-1 01-000-11000 Leg. Pin: 042107510000

181-76;477-52

Children Parents

### Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - City
SIGN SPECIAL - NA
CONDITIONAL BOA -

## BAYFIELD COUNTY PERMIT

## WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

No: 04082201-2022

Tax ID: 38707

Issued To: G GERHARD W HETTLER III &

**CAROL A WESTON REV TRUST** 

Location: PAR IN NE NE IN DOC

Section 32

Township 50 N.

Range 08 W.

Govt Lot 0

2021R-592153

Lot

**Block** 

**Subdivision:** 

CSM#

For. Residential / Porch / 16L x 15W x 8H

Condition(s): To meet all setbacks. No living and/or sleeping quarters permitted. Town/State/DNR permits may be required. Height is being permitted at 15' instead of 8' as indicated at the time of submittal.

NOTE:

This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

**Mckenzie Slack** 

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

**Authorized Issuing Official** 

Thu Apr 28 2022

**Date** 

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

(Disabinan), Any future armonisms of development requires additional normitation

		,	

0408 2201		
	Current Parcel Information	Applicant Parcel Information
Tax ID #	38707	38707
Taxpayer Name	GERHARD W HETTLER III & CAROL A WESTON REV TRUST	G GERHARD W HETTLER III & CAROL A W
Site Address	No Parcel Address Available	82825 WHITE BIRCH RD
Site City State Zip	No Parcel Address Available	PORT WING, WI, WI
Section/Township/Range	32/50/08	32/50/8
Abbreviated Legal	PAR IN NE NE IN DOC	PAR IN NE NE IN DOC 2021R-592153
Deeded Acres	0	0
Taxpayer Address	3852 EDGEWOOD AVE NORTH ⚠	3852 Edgewood Ave N
Taxpayer City, State Zip	CRYSTAL, MN 55427 ⚠	Crystal, MN 55427

Setbacks

Comments

**Property Details** 

Contact Info

Fees

Project Review

View Contacts

View Tax Record

Issuance Info

Timeline

, Setback	Submitted	Final	Status	Compliance
North Lot Line	208.69 ft		Confirmed	Yes
South Lot Line	222.83 ft		Confirmed	Yes
East Lot Line	189.74 ft		Confirmed	Yes
West Lot Line	119.75 ft		Confirmed	Yes
Centerline of Platted Road	174.82 ft		Confirmed	Yes
River Stream Creek or Lake	300 ft		Confirmed	Yes
Wetland	25 ft +		Confirmed	Yes
Sanitary	0 ft		Confirmed	Yes
Well	0 ft	50 ft	Corrected	Yes
Established Right-of-Way	0 ft		Not Inspected	Yes

Edit

## 16 × 15



#### Bayfield County, WI





			26

I, GERHARD WILLIAM HETTLER	
authorize CAROZ A. WESTON	
to apply for a land use permit on our property located at:  82825 WHITE BIRCH POAD	PORT WING
Serlad W Hlth Signature	
4/21/2022 Date	

I. Carol Ann Weston 1111	
I, <u>Carof HAM Weston</u> authorize <u>Gerhard William</u> Hettler	
authorize ber hard William 11911	
to apply for a land use permit on our property located at	:

Cawlandston Signature

4/21/22 Date

First Dollar:

#### Real Estate Bayfield County Property Listing

**Today's Date:** 4/26/2022

**Property Status: Current** 

Created On: 2/3/2022 10:39:14 AM

Description	Updated: 2/3/2022
Tax ID:	38707
PIN:	04-042-2-50-08-32-1 01-000-11100
Legacy PIN:	
Map ID:	
Municipality:	(042) TOWN OF PORT WING
STR:	S32 T50N R08W
Description:	PAR IN NE NE IN DOC 2021R-592153
Recorded Acres:	0.000
Calculated Acres:	3.450
Lottery Claims:	0

Zoning: (R-4) Residential-4 127 ESN:

Tax Districts	Updated: 2/3/2022
1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE
047100	PORT WING SANITARY

Recorded Documents Updated: 3/15/2006

**WARRANTY DEED** 2021R-592153 Date Recorded: 11/19/2021

**■ TERMINATION OF DECEDENT'S INTEREST** 2020R-581717 Date Recorded: 4/13/2020

**OUIT CLAIM DEED** 2007R-512187 964-136 Date Recorded: 2/9/2007

☐ CONVERSION Date Recorded: 181-76;477-52

**WARRANTY DEED** 376715 477-52 Date Recorded: 9/23/1988

🎎 Ownership Updated: 2/3/2022 **GERHARD W HETTLER III & CAROL A** CRYSTAL MN **WESTON REV TRUST** 

**Billing Address: GERHARD W HETTLER III &** CAROL A WESTON REV TRUST CAROL A WESTON REV TRUST 3852 EDGEWOOD AVE NORTH CRYSTAL MN 55427

**Mailing Address: GERHARD W HETTLER III &** 3852 EDGEWOOD AVE NORTH CRYSTAL MN 55427

Site Address \* indicates Private Road 82825 WHITE BIRCH RD PORT WING 54865

Property Assessment		Updated: N/A		
2022 Assessment Detail				
Code	Acres	Land	Imp.	
N/A				
2-Year Comparison	2021	2022	Change	
Land:	0	0	0.0%	
Improved:	0	0	0.0%	
Total:	0	0	0.0%	

Property History	
Parent Properties	Tax ID
04-042-2-50-08-32-1 01-000-11000	28540
04-042-2-50-08-32-1 01-000-19000	38212

**HISTORY** Expand All History

White=Current Parcels

Pink=Retired Parcels

Tax ID: 28544 Pin: 04-042-2-50-08-32-1 01-000-13000 Leg. Pin: 042107605000

Tax ID: 38212 Pin: 04-042-2-50-08-32-1 01-000-19000

Tax ID: 28540 Pin: 04-042-2-50-08-32-1 01-000-11000 Leg. Pin: 042107510000

Parents Children 38707 This Parcel

# Town, City, Village, State or Federal Permits May Also Be Required

not completed or if any conditions are violated.

LAND USE - X SANITARY - None SIGN -SPECIAL - NA CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

## WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTRUCTION

No: 02	.042201-2022	Tax ID: 28202		Issued To: J	OSEPH X SCARFO
	on: SE NE SE IN DOC 8-590938 (TOG W EASE) 340A	Section 14	Township 50 N.	Range 08 W.	PORT WING
Govt L	ot 0 Lot	Bloc	k	Subdivision:	CSM#
For: Re	esidential / Detached Garage /	20L x 12W x 16H, Deck	: 24L x 24W x1H		
	tion(s): To meet setbacks inclunal storage only. Town/State/[				
NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.  Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.		f the authorized	Mcke	enzie Slack	
			Authorize	d Issuing Official	
		red if any of the	Wed A	Apr 27 2022	
					Date
	This permit may be void or re	evoked if any performan	ce conditions are		

	Current Parcel Information	Applicant Parcel Information
Tax ID #	28202	28202
Taxpayer Name	JOSEPH X SCARFO	JOSEPH X SCARFO
Site Address	No Parcel Address Available	
Site City State Zip	No Parcel Address Available Port Wing, WI, WI	
Section/Township/Range	14/50/08 14/50/8	
Abbreviated Legal	SE NE SE IN DOC 2021R-590938 SE NE SE IN DOC 2021R-590938 (TOG	
Deeded Acres	10	
Taxpayer Address	1022 GRAND AVE ⚠ 1022 Grand Ave	
Taxpayer City, State Zip	SUPERIOR, WI 54880 A	Superior, WI 54880

Setbacks

Comments

Timeline

Issuance Info/

Project Review

**Property Details** 

Contact Info

Fees

Property Details Contact Info Fees	Project Review Setbacks	Comments Issuance Info	Timeline °
Setback	Submitted Final	Status	Compliance Comments
North Lot Line	213.13 ft	Not Inspected	
South Lot Line	419.74 ft	Not Inspected	
East Lot Line	178.28 ft	Not Inspected	
West Lot Line	447.78 ft	Not Inspected	
Centerline of Platted Road	725.57 ft	Not Inspected	
River Stream Creek or Lake	490.75 ft	Not Inspected	
Wetland	25 ft +	Not Inspected	
Sanitary	0 ft	Not Inspected	
Well	0 ft	Not Inspected	
Established Right-of-Way	0 ft	Not Inspected	

Edit



When we see a loft and deck we anticipate living quarters so just trying to make sure I understand the structure in its' entirety.
McKenzie
From: Joseph Scarfo < joeyxerxes@gmail.com > Sent: Friday, April 22, 2022 1:08 PM To: Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > Subject: Re: Tax ID 28202 Zoning Permit Application
Good Afternoon McKenzie!
I've attached a screenshot of what will be built off the "Samsung notes" app on my phone (I apologize for the awful hand writing). The structure will be mostly for storing my side by sides, atvs and related tools to fix them for riding in summer with my father. Old 13 road is a great ATV route and gives good access to other forest roads inside Bayfield peninsula. If you have any questions please let me know.
Thanks,
Joe
715-817-6029
Call/text anytime
On Fri, Apr 22, 2022, 8:21 AM Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > wrote:
Hi Joe,
I had a chance to review your zoning permit application, and just need a blueprint of the proposed structure including the deck. We need to see dimensions and what will be in the structure to confirm there are no bathrooms and bedrooms proposed.

You can hand draw it and email it to me.

Thank you,

#### McKenzie Slack

#### **Assistant Zoning Administrator**

Bayfield County Planning & Zoning

117 E Fifth Street

PO Box 58

Washburn, WI 54891

P: 715-373-3511

E: mckenzie.slack@bayfieldcounty.wi.gov

From: Joseph Scarfo < joeyxerxes@gmail.com > Sent: Monday, April 25, 2022 1:31 PM To: Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > Subject: Re: Tax ID 28202 Zoning Permit Application
Loft would be 12x10. The piece of deck on the loft side of the structure will be 4x12.
On Mon, Apr 25, 2022, 11:17 AM Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > wrote:  You show a little piece of deck on the loft side of the structure, how big is that piece? So the loft is 12 x?
Thank you,
McKenzie
From: Joseph Scarfo < <u>joeyxerxes@gmail.com</u> > Sent: Monday, April 25, 2022 9:51 AM To: Mckenzie Slack < <u>mckenzie.slack@bayfieldcounty.wi.gov</u> > Subject: Re: Tax ID 28202 Zoning Permit Application
Deck will be outside. Loft inside will be used to store spare parts and equipment.
On Mon, Apr 25, 2022, 7:49 AM Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > wrote:  Good Morning,
Is the "lofted shed" and deck interior items? Or will the deck be outside?

#### Mckenzie Slack

From: Sent: To: Subject:	Joseph Scarfo <joeyxerxes@gmail.com> Tuesday, April 26, 2022 9:04 AM Mckenzie Slack Re: Tax ID 28202 Zoning Permit Application</joeyxerxes@gmail.com>
I concur with that drawing	
On Tue, Apr 26, 2022, 7:19 AM	Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > wrote:
Would you concur with the att make sense if the loft is 12 x 10	cached drawing? You had the total draw in as 24' for the loft and deck but that doesn't 0 with 4' of deck.
Thanks!	
McKenzie	
From: Joseph Scarfo < joeyxerx Sent: Monday, April 25, 2022 4 To: Mckenzie Slack < mckenzie Subject: Re: Tax ID 28202 Zoni	4:40 PM <u>.slack@bayfieldcounty.wi.gov</u> >
equipment (like decoys) etc the back of the building. This k	the structure and is only 12x10. The loft will be used for spare parts storage, hunting The deck wraps around the first floor of the building on 3 sides, with a 4 foot overlap at building will not be used for sleeping, as there will be no running water or a sleeping area age/storage area on my property.
On Mon, Apr 25, 2022, 4:31 Pl	M Mckenzie Slack < mckenzie.slack@bayfieldcounty.wi.gov > wrote:
You have the total length bei mean to say the loft is 12' x 2	ng 24', if the loft space is 10' and the deck loft space is 4' that would only be 14'. Do you 0'? And that would mean the deck overhangs the side of the structure.
Thank you,	

### Bayfield County, WI



Town

## Field Investigation

Date:	Arrive: Depart:
Landowner:	Photos taken: Yes No
Project Location:	Persons Present:
Waterway:	Purpose of visit ZP OnsiteSAPSanitaryWetland Delineation
PIN# *Attach Real Estate Inquiry* Paid \$ Receipt #	FloodplainOHWMBoathouseComplaintAveragingWalkoutOther:
Ploor plan 1st floor  barn style garage inmance cloors	Deck 10ft/ 2nd story  Deck 10ft/ 30  Storage

...

#### Real Estate Bayfield County Property Listing

Today's Date: 4/20/2022

**Property Status: Current** 

Created On: 3/15/2006 1:15:58 PM

	400
21	436

Ownership

Updated: 10/6/2021

JOSEPH X SCARFO

SUPERIOR WI

**Billing Address: JOSEPH X SCARFO** 1022 GRAND AVE

SUPERIOR WI 54880

**Mailing Address:** JOSEPH X SCARFO 1022 GRAND AVE SUPERIOR WI 54880

Site Address

\* indicates Private Road

85435 OLD 13 RD

PORT WING 54865

	Pr	
	2022	
	Code	
	G6-PR	
_	2-Yea	
	Land:	
•	Impr	

Updated: 9/7/2021 roperty Assessment **Assessment Detail** Acres Land ODUCTIVE FOREST 10.000 11,000



Imp. 2022 Change 2021 ar Comparison 11,000 0.0% 11,000 0.0% 0 Improved: 0 0.0% 11,000 11,000 Total:



Description	Updated: 10/6/2021
Tax ID:	28202
PIN:	04-042-2-50-08-14-4 01-000-30000
Legacy PIN:	042104303000
Map ID:	
Municipality:	(042) TOWN OF PORT WING
STR:	S14 T50N R08W
Description:	SE NE SE IN DOC 2021R-590938 (TOG W EASE) 340A
Recorded Acres:	10.000
Calculated Acres:	9.583
Lottery Claims:	0
First Dollar:	No
Zoning:	(AG-1) Agricultural-1
ESN:	127
Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
042	TOWN OF PORT WING
044522	SCHL-SOUTHSHORE
001700	TECHNICAL COLLEGE

Recorded Documents	Updated: 8/9/2012
WARRANTY DEED	
Date Recorded: 9/15/2021	2021R-590938
<b>■ WARRANTY DEED</b>	
Date Recorded: 11/25/2020	2020R-585723

**■ WARRANTY DEED** Date Recorded: 7/16/2012 2012R-544770 1086-468 **□** CONVERSION

482925 857-389;859-690;860-2 Date Recorded: 3/15/2006 **WARRANTY DEED** 2003R-482925 1086-468 Date Recorded: 6/16/2003

**QUIT CLAIM DEED** Date Recorded: 6/13/2003 2003R-482850 859-690

**■ SUMMARY REAL ESTATE DISPOSITION JUDGMENT** Date Recorded: 5/28/2003

1/1